



Original Article

Twelve steps to evaluating interprofessional education

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Received 28 September 2016; revised 26 October 2016; accepted 27 October 2016; Available online 23 November 2016



المخلص

تضع هذه الورقة خطة؛ خطوة بخطوة لمساعدة القراء على تصميم وتطبيق وتوزيع تقايم التعليم المتداخل بين التخصصات نقدم الإثنتي عشرة خطوة التالية التي تعتبر أساسية لهذه العملية: صياغة أسئلة التقييم، والاتفاق على نهج التقييم، واستخدام أطر للتقييم، والاعتماد على خبرات التقييم، ومراجعة الأدبيات، واختيار الأسلوب والتصميم، وتأمين الموافقة الأخلاقية، والوصول إلى البيانات، ومعالجة قضايا العمل الميداني، واستخدام أدوات التقييم، والنظر في الموارد، وخيارات التوزيع.

الكلمات المفتاحية: التعليم المتداخل بين التخصصات؛ التقييم؛ البحث؛ تصميم المنهج؛ إطار التقييم

Abstract

This paper sets out a step-by-step plan to help readers design, implement and disseminate evaluations of inter-professional education (IPE). We present the following twelve steps that are central to this process: formulating evaluation questions, agreeing on the evaluation approach, using evaluation frameworks, drawing upon evaluation expertise, reviewing the literature, selecting a methodology and design, securing ethical approval, accessing data, addressing fieldwork issues, using evaluation instruments, considering resources, and outlining disseminating choices.

Keywords: Curriculum design; Evaluation; Evaluation framework; Interprofessional education; Research

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Introduction

In this paper, we offer a range of approaches to evaluating interprofessional education (IPE) to help design, implement and disseminate an IPE programme in a realistic and manageable manner. The paper outlines twelve key steps to ensure best practices with the evaluation process, such as the formulation of study questions, use of an appropriate evaluation framework, selection of a rigorous evaluation design, use of validated evaluation instruments and ideas for dissemination. In providing this guide, we anticipate that active engagement in robust evaluation will generate high quality evidence that can enhance the future development and delivery of IPE.

Step one: formulating evaluation questions

Your choice of question (or questions) may be determined by the need to establish whether the IPE experience has met the outcome expectations that have been negotiated by relevant stakeholders, e.g., managers, teachers, clinicians and patients. The question(s) may also take into account ways in which your evaluation may address more general concerns about means and ends in IPE or replicate studies by others employing the same methods and instruments. The questions, for example, might be:

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Peer review under responsibility of Taibah University.



- How was the interprofessional teaching delivered and experienced by the learners?
- Did the learners' skills for collaboration improve after the IPE experience and, if so, how?
- Were the learners' gains in knowledge and/or skills still evident in the months after their IPE experience?
- Did changes in service delivery occur following the IPE experience?

Do make sure that the questions you ask can be effectively answered by employing the expertise of colleagues with evaluation/research experience. Trouble taken at the outset to sharpen questions may spare you frustration and disappointment later.

Step two: agreeing to the evaluation approach

The most appropriate evaluative approach will depend upon the questions that you pose. The approach may be:

- Formative, e.g., helping to understand the initial effects of IPE in order to develop and strengthen the programme
- Summative, e.g., helping to understand the final impact of an IPE activity
- Process-focused, e.g., exploring interprofessional teaching or learning processes
- Outcomes-focused, e.g., examining the varying effects (outcomes) of IPE

These approaches need not be mutually exclusive: you could, for example, undertake an IPE evaluation that is formative and process-focused, or summative and outcomes-focused. The evaluation may be also conducted internally, for example, by the teacher or facilitator; or externally, for example, by someone not otherwise associated with the programme.

Step three: using the evaluation frameworks

You may well find Biggs' presage-process-product (3P) model of teaching and learning to be a helpful framework, as expanded and applied in IPE.^{3,15} This model highlights all the elements constituting the educational experience, factors shaping that experience, and the relationship between them.

Presage factors are those that influence and constrain the design and delivery of IPE, such as the political climate, management support, a teacher's experience, and a student's preconceptions.

Process factors are concerned with the delivery of the IPE, such as decision-making, interprofessional interactions, approaches to learning and teaching and levels of learner engagement.

Product factors are concerned with the outcomes of the IPE. You may also find a classification of the outcomes of IPE that we developed from Kirkpatrick's four-point typology of educational outcomes⁴ into six categories (see Table 1), which is a useful framework to use.¹⁰

Another useful framework to consider is Pawson and Tilley's realistic evaluation.¹³ This approach also explores how contextual (presage) factors affect teaching/learning activities (processes), which in turn affect the impact

Table 1: Interprofessional outcomes.

Level 1 – Reaction	Learners' views on the learning experience and its interprofessional nature.
Level 2a – Modification of attitudes/perceptions	Changes in reciprocal attitudes or perceptions between participant groups. Changes in perception or attitude towards the value and/or use of team approaches to caring for a specific client group.
Level 2b – Acquisition of knowledge/skills	Including knowledge and skills linked to interprofessional collaboration.
Level 3 – Behavioural change	Identifies individuals' transfer of interprofessional learning to their practice setting and their changed professional practice.
Level 4a – Change in organisational practice	Wider changes in the organisation and delivery of care.
Level 4b – Benefits to patients/clients	Improvements in health or well-being of patients/clients.

(outcomes) produced from an IPE programme. Hollenberg et al. provide a useful example of how the realistic evaluation model was employed in their IPE evaluation.⁸

Step four: drawing upon evaluation expertise

If you lack previous experience in evaluating education, do approach experienced colleagues for advice and assistance. Assembling or joining an evaluation team with such experience can be a useful way to draw upon a range of support, creativity and guidance at every stage from developing an interprofessional evaluation, to implementation and dissemination.

Step five: reviewing the literature

Taking note of existing literature in journals, books and reports is important. A literature search normally determines, first, what is known about the type of IPE that you are about to evaluate (e.g., how it has been previously delivered and its reported impact); and, second, about methodological literature to deepen your understanding of designs, methods and analytical tools that have been previously employed.

A careful review of the literature can help ensure that your evaluation adds something new to the academic knowledge base about IPE. (This is especially important if you want to publish your evaluation in a peer-reviewed journal.) The literature can also help you to compare and contrast what others have found with results from similar settings to your own. Such comparisons help to guide future developments as well as promote reflection on the process of evaluation.

The most effective way to locate relevant literature is to use electronic bibliographic databases, such as the following: Medline (focuses on medically orientated research); CINAHL (focuses on nursing and allied health professions orientated research); and ASSIA (focuses on health and social sciences research). We also encourage you to consider searching other

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